

50  
10/12

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | BA       | 70385  |          |
| O.I.P.E. CLASSIFIER       |          | 10     | 8-16-00  |
| FORMALITY REVIEW          | RT       | 515    | 09-14-00 |
| RESPONSE FORMALITY REVIEW |          |        |          |

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral)... Canceled                      A ..... Appeal  
+ ..... Restricted                      O ..... Objected

| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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